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United Nations Population Fund

Country programme document for Turkey

Proposed indicative UNFPA assistance: $10.25 million: $3.25 million from regular resources and $7.0 million through co-financing modalities and/or other resources, including regular resources

Programme period: Five years (2016-2020)

Cycle of assistance: Sixth

Category per decision 2013/31: Pink

Proposed indicative assistance (in millions of $):

Strategic plan outcome areas		Regular resources	Other resources	Total
Outcome 1	Sexual and reproductive health	1.50	4.00	5.50
Outcome 3	Gender equality and women's empowerment	1.00	2.75	3.75
Outcome 4	Population dynamics	0.25	0.25	0.50
Programme coordination and assistance		0.50	–	0.50
Total		3.25	7.00	10.25

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Please recycle

I. Situation analysis

1. The population of Turkey reached 77.7 million in 2014; it is expected to stabilize below 100 million by 2050. A member of the Organisation for Economic Cooperation and Development and the Group of 20, Turkey ranks as the 17th largest economy in the world. Turkey has been a candidate for European Union membership since 1999.

2. Turkey ranks 69 out of 187 countries in the 2014 Human Development Index, with a high income inequality (Gini index 0.4). Although Turkey achieved the Millennium Development Goals in poverty alleviation, education and reducing maternal and infant mortality, there are challenges in achieving the International Conference on Population and Development mandate due to disparities and inequalities faced by women in rural areas, seasonal migrant workers, the Roma population, people at risk of HIV, sex workers, individuals and groups based on their sexual orientation and victims of gender-based violence.

3. As a result of the 2011 health structural reform, the delivery of sexual and reproductive health services has been transferred to family physicians; however, many lack the necessary skills. This has led to problems in the provision of family planning services, including provision of commodities, sexually transmitted infections management, volunteer counselling and HIV testing. The modern contraceptive prevalence rate is 47.4 per cent, though with large regional variations (2013).

4. The total fertility rate has stabilized at the level of replacement, ranging from 3.41 children per woman in eastern Turkey to 1.93 in the western regions (2013); the Government has been taking a pro-natalist and pro-family stand through programmes such as the recent Protection of the Family and Dynamic Population Package.

5. The number of HIV cases has increased 3.5 times since 2010, reaching 9,379 cases in 2014. However, Turkey lacks epidemiological data on key populations that are most at risk of HIV, which are critical in slowing down acceleration of the epidemic.

6. Disparities and inequalities in access to sexual and reproductive health and rights persist in Turkey, notably between regions, urban and rural areas, and men and women. The maternal mortality ratio for seasonal migrant workers and their families is very high (153 per 100,000 live births); it is 10 times higher than the national average of 16 per 100,000 live births. The adolescent fertility rate is 28 per 1,000 women aged 15-19 years in urban areas; the figure rises to 45 per 1,000 women in rural areas (Demographic Health Survey 2013) and to 72 per 1,000 women among seasonal migrant workers (UNFPA and Harran University Research).

7. Young people aged 10-24 years make up 24 per cent of the population. Approximately 29 per cent of youth (aged 15-29 years) are neither in school nor employed. Absence of a multisectoral youth policy with youth participation, limited capacity of non-governmental organizations, lack of youth-friendly health services and comprehensive sexuality education in school-based curricula are long-standing challenges.

8. The legal framework covering women's human rights and gender equality is broadly in place. However, the discrepancy is still large between legal frameworks and their actual impact on the lives of women. According to the 2014 Global Gender Gap Index, Turkey ranked 125 among 142 countries. About 91,000 adolescent girls give birth every year; approximately one in four married women were married under the age of 18 (2013). Female labour force participation, at 30 per cent in 2013, is the lowest among Organisation for Economic Cooperation and Development countries. Women comprise only 14 per cent of parliamentarians; in local assemblies, the figure drops to 10 per cent. Gender equality is not mainstreamed at the local level, and women-friendly services are still weak.

9. Gender inequality is the main root cause of gender-based violence in Turkey. According to the National Domestic Violence Survey (2014), 38 per cent of surveyed

women had been physically or sexually abused by their husbands or partners. A UNFPA survey indicates a high prevalence (32 per cent) of sexual and physical violence among white-collar working women and the absence of response mechanisms within the private sector. Two national action plans on gender equality and combatting gender-based violence exist, but monitoring and evaluation components are still being finalized; they have not yet been presented to Parliament for adoption.

10. Since April 2011, approximately 2 million Syrians have entered Turkey. As of May 2015, 253,101 Syrian refugees are residing in camps, the remaining are living in out-of-camp settings, some in very poor conditions. Access to sexual and reproductive health services and gender-based violence response services is very limited for refugees due to poor reach and knowledge, cultural and language barriers, and unavailability of certain standards and guidelines for services for refugees. Some 75 per cent of the refugees in Turkey are women, adolescents and children, and are vulnerable to sexual violence, early and forced marriage, trafficking, high-risk pregnancies, unsafe deliveries, abortions and sexually transmitted infections. However, programmes customized for young refugees are non-existent. According to Interagency Working Group on Reproductive Health in Crises, an estimated 100,000 pregnant and delivering refugee women will need reproductive health services annually in Turkey. With the recent escalating terror attacks, Iraqis have also started flowing into the country. The Turkish Government has issued a temporary protection regulation that permits Syrians access to health, education, social assistance and the labour market. Nevertheless, regional instability and the possibility of massive refugee inflows necessitate strengthening of Minimum Initial Service Package preparedness.

11. There have been significant improvements in the collection and analysis of data on population, youth, gender and sexual and reproductive health in Turkey. However, public sector capacity on evidence-based policymaking, population and development issues, and monitoring and evaluation needs strengthening. There is still limited data specific to the most vulnerable populations; this hampers the process of development of evidence-based policies and programmes targeting these population groups.

II. Past cooperation and lessons learned

12. The country programme evaluation indicated that UNFPA has achieved a high degree of relevance in terms of sexual and reproductive health, population and development, and gender needs in Turkey; this is particularly due to its comparative advantage in these areas. UNFPA has been effective in (a) improving access to maternal health services by seasonal migrant workers; (b) overall youth interventions; (c) gender-based violence protection; (d) local gender mainstreaming in select cities; (e) increasing analysis of data and information on population and development at the local and central levels; (f) collaboration between the Government, non-governmental organizations and private sector; (g) South-South cooperation; and (h) activation of emergency response mechanisms in the Syrian crisis, both for refugees in Turkey and across the border.

III. Proposed programme

13. UNFPA and the Government have developed the sixth country programme through a participatory approach in consultation with civil society, in line with the analysis of the current situation as well as the national and international agenda. The programme will focus on advocacy and policy dialogue in support of government efforts to reduce disparities in the access to sexual and reproductive health and rights and gender equality, particularly for most vulnerable. UNFPA will partner with state and non-state actors, United Nations organizations and donors. The programme will work on a transformative development agenda that is universal, inclusive, human rights-based, integrated and anchored in the principles of equality. Programming strategies are advocacy, policy dialogue/advice, generating evidence for policy development.

14. The country programme will focus on (a) reaching more of the most vulnerable people and groups, including refugees; (b) strengthening interventions for marginalized youth; and (c) enhancing its advocacy role by promoting gender equality and coordinated gender-based violence protection and prevention services and local-level gender mainstreaming. The programme will further strengthen strategic working relationships with ministries, strengthen sustainability, promote visibility and improve synergy and complementarity between components.

15. The proposed programme interventions reinforce the Istanbul Convention and National Action Plans on Gender Equality and Gender-Based Violence; the International Conference on Population and Development beyond 2014 framework of actions; the Regional Refugee and Resilience Plan on Syria, the United Nations Development and Cooperation Strategy (2016-2020), the Universal Periodic Review 2015; the Convention on Eliminating All Forms of Discrimination against Women, the 10th National Development Plan and Health Strategic Plan (2013-2017), and will be guided by the sustainable development goals.

A. Outcome 1: Sexual and reproductive health

16. Output 1: Strengthened institutions and civil society organizations to ensure delivery of accessible and rights-based sexual and reproductive health and youth-friendly services to underserved and vulnerable groups. This will be achieved through advocacy, policy dialogue and technical assistance in (a) development, implementation and scaling-up of gender-sensitive, rights-based legislation and policies on sexual and reproductive health for vulnerable groups and youth; (b) institutionalizing pre- and in-service training on sexual and reproductive health services, including family planning and HIV and youth peer-education programming, customized for vulnerable groups; (c) designing outreach activities for vulnerable groups and youth-friendly service models for safer sexual and reproductive behaviour; (d) establishment of monitoring and evaluation mechanisms on access to services; (e) awareness-raising on sexual and reproductive health, including HIV protection needs of vulnerable groups; (f) improving logistics management information system towards better reproductive health commodity security; and (g) combating child marriages and adolescent pregnancy through prevention programmes.

17. Output 2: Strengthened national capacity to provide sexual and reproductive health and sexual and gender-based violence response services in humanitarian settings. This will be achieved through technical assistance, capacity-building and service delivery on (a) emergency response services, strengthened by institutionalizing pre- and in-service thematic training programmes on the Minimal Initial Service Package, emergency obstetric care and clinical management of rape; (b) design of standard operational procedures on sexual and gender-based violence response in humanitarian settings and outreach activities; (c) provision of sexual and reproductive health, including family planning and HIV services and empowerment of women, as well as emergency response services to address sexual and gender-based violence among refugees, including out-of-camp populations, adolescents and young refugees; (d) provision of reproductive health kits, commodities, hygiene kits, medical equipment and supplies; (e) awareness-raising of refugees and non-professional service providers through information, education and communication materials on reproductive health and sexual and gender-based violence; and (f) generation of the disaggregated data, analysis and policy formulation on refugees.

B. Outcome 3: Gender equality and women's empowerment

18. Output 1: Strengthened institutional capacity of public and civil society organizations to promote gender equality, prevent gender-based violence and harmful practices, including in the private sector. This will be achieved in partnership with civil society organizations and universities through advocacy, policy dialogue and technical assistance on (a) rights-based legislation, policies, including local equality action plans and standard operating

procedures for provision of women-friendly services; (b) improved services, along with strengthening of pre- and in-service training programmes for prevention, treatment and rehabilitation of sexual and gender-based violence; (c) establishment of a coordination mechanism among responsible government agencies, including local authorities, on sexual and gender-based violence response; (d) strengthening advocacy capacity of women's non-governmental organizations on gender issues and monitoring of national and international obligations regarding women's rights and reproductive rights; (e) establishment of mechanisms for promoting gender equality and eliminating gender-based violence in the private sector; and (f) promoting gender equality and engagement of men and boys to address gender inequality, in partnership with civil society and faith-based organizations.

C. Outcome 4: Population dynamics

19. Output 1: Increased availability of evidence through cutting-edge in-depth analysis on population dynamics, sexual and reproductive health, and their linkages to poverty eradication and sustainable development to promote the post-2015 development agenda. This will be achieved through advocacy, policy dialogue and technical assistance in (a) generating data, impact analysis, dissemination and use for informed policy development on population dynamics, sexual and reproductive health, ageing, youth and gender, with particular focus on vulnerable groups; (b) strengthening institutions and partnerships for evidence-based policymaking, monitoring and evaluation; and (c) strengthening national institutions and civil society for promotion of the UNFPA mandate in the post-2015 development agenda.

IV. Programme management, monitoring and evaluation

20. In coordination with the Ministry of Foreign Affairs, UNFPA will implement the country programme using the national execution modality, in line with a rights-based and results-based programming approach. In cooperation with the established coordination bodies, UNFPA will select partners based on their strategic position and ability to deliver high-quality programmes, and monitor their performance and ensure the implementation of audit recommendations. The programme partnership plan 2016-2020 reflects the middle-income country context, the UNFPA business model and governance system of Turkey in the various partnership modalities. UNFPA will seek additional resources from international institutions and the private sector, and will proactively participate in joint initiatives.

21. UNFPA, the Government and partner organizations are committed and accountable to deliver the expected results of the programme by regularly undertaking joint participatory reviews and monitoring and evaluation of programme implementation. The country office will execute project-level and programme-level evaluations and reviews.

22. The UNFPA country office will consist of a representative, an assistant representative, five national programme analysts, a partnership and resource mobilization analyst, and programme and operations support staff funded from the integrated institutional, core and non-core programme budgets. Technical and programmatic support from the UNFPA regional office, headquarter units and other sources will also be utilized, as required.

RESULTS AND RESOURCES FRAMEWORK FOR TURKEY (2016-2020)

National priority: The health of the people protected and improved in an equitable manner
United Nations Development Cooperation Strategy (UNDCS) outcome: By 2020, integrated gender-sensitive and sustainable quality social services are more accessible and more equitable for all underserved populations
Indicator: Maternal mortality ratio. *Baseline: Highest three Nomenclature of Territorial Units for Statistics (NUTS1) regions: 26.3 per 100,000 live births (Middle East Anatolia); 22.6 per 100,000 live births (Northeast Anatolia); 21.3 per 100,000 live births (Mediterranean); Target: 25% reduction in maternal mortality ratio for the highest 3 NUTS1 regions*
National priority: Disaster resilience of the society improved
UNDCS outcome: Government institutions provide improved and sustainable multisectoral services to people under international protection based on an effective registration and refugee status determination mechanism
Indicators: Percentage of refugees benefiting from primary health care, including immunization, and maternal health care provided by the State. *Baseline: 75%; Target: 100%.* Systematic assistance to persons under international protection with special needs in line with international standards. *Baseline: No; Target: Yes*

UNFPA strategic plan outcome	Country programme outputs	Output indicators, baselines and targets	Partners	Indicative resources
Outcome 1: Sexual and reproductive health Increased availability and use of integrated sexual and reproductive health services, including family planning, maternal health and HIV, that are gender-responsive and meet human rights standards for quality of care and equity in access Outcome indicator(s): • Modern contraceptive prevalence rate *Baseline: 47.4%; Target: 51%* • Proportion of births in health-care institutions *Baseline: 91.7%; Target: 95%* • National budget for family planning commodities *Baseline: 3.7 million Turkish Lira; Target: 7.5 million Turkish Lira*	Output 1: Strengthened institutions and civil society organizations to ensure delivery of accessible and rights-based sexual and reproductive health and youth-friendly services to underserved and vulnerable groups	• Number of new legislation and policies on sexual and reproductive health services for vulnerable groups and youth developed and adopted by ministries (during 2016-2020) *Baseline: 0; Target: 4* • Number of new standard operating procedures on sexual and reproductive health services for vulnerable groups developed and adopted by ministries (during 2016-2020) *Baseline: 0; Target: 3* • Number of new institutionalized pre- and in-service training programmes covering services for vulnerable groups *Baseline: 0; Target: 3* • Logistics management information system for family planning commodities in Ministry of Health re-established *Baseline: No; Target: Yes*	Ministries of Health; Family and Social Policies; Labour, Social Security; Development; and Interior; Presidency of Religious Affairs; Turkish Parliament; women, youth and human rights NGOs; municipalities; universities	$5.5 million ($1.5 million from regular resources and $4.0 million from other resources)
	Output 2: Strengthened national capacity to provide sexual and reproductive health and sexual and gender-based violence response services in humanitarian settings	• Number of new guidelines, protocols and standards on sexual and gender-based violence response in emergencies developed (during 2016-2020) *Baseline: 0; Target: 3* • National mechanism to implement Minimal Initial Service Package at the onset of a crisis in place *Baseline: No; Target: Yes* • Number of service delivery points (supported by UNFPA) providing sexual and reproductive health and sexual and gender-based violence services in humanitarian settings *Baseline: 5; Target: 20*	Prime Ministry Disaster and Emergency Management Agency; Directorate General of Migration Management; Ministries of Health; Family and Social Policies; local authorities; Syrian and international NGOs; universities	
Outcome 4: Population dynamics Strengthened national policies and international development agendas	Output 1: Increased availability of evidence through cutting-edge in-depth analysis on population	• Number of new reports on population dynamics and their links to sustainable development, sexual and reproductive health and reproductive rights and gender prepared and disseminated	Ministry of Development; universities; NGOs	$0.5 million ($0.25 million from regular resources and

through integration of evidence-based analysis on population dynamics and their links to sustainable development, sexual and reproductive health and reproductive rights, HIV and gender equality Outcome indicator(s): • The new national development plan addresses population dynamics by accounting for population trends and projections in setting development targets *Baseline: No; Target: Yes*	dynamics, sexual and reproductive health and their linkages to poverty eradication and sustainable development to promote the post-2015 development agenda	*Baseline: 0; Target: 5* • An institutionalized population and development and evidence-based policymaking training programme for public institutions is in place *Baseline: No; Target: Yes*		$0.25 million from other resources)
National priority: Eradicating all forms of gender-based violence **UNDCS outcome:** Improved legislation, policies, implementation and accountability mechanisms (on prevention and protection) to promote gender equality and reduce all forms of sexual and gender-based violence by 2020 **Indicator**: Number of legislation and policies on gender-based violence prevention and protection developed/revised in line with Istanbul Convention. *Baseline: 0; Target: 2 developed and 2 revised*				
Outcome 3: Gender equality and women's empowerment Advanced gender equality, women's and girls' empowerment, and reproductive rights, including for the most vulnerable and marginalized women, adolescents and youth Outcome indicator(s): • Gender equality and gender-based violence national action plans that integrate reproductive rights with specific targets and national public budget allocations *Baseline: No; Target: Yes* • Proportion of actions taken on CEDAW recommendations on women's rights from the previous reporting cycle *Baseline: 0; Target: 50%* • Percentage of women aged 15-49 years who think that a husband/partner is justified in hitting/beating his wife/partner under certain circumstances *Baseline: 13%; Target: 10%*	Output 1: Strengthened institutional capacity of public and civil society organizations to promote gender equality, prevent gender-based violence and harmful practices, including in the private sector	• Number of new legislation and policies in line with Istanbul Convention developed and adopted by ministries (during 2016-2020) *Baseline:0; Target. 3* • Number of new standard operating procedures in line with Istanbul Convention adopted by ministries (during 2016-2020) *Baseline: 0; Target: 3* • Number of new institutionalized in-service training programmes on sexual and gender-based violence prevention and protection services for women and girls *Baseline. 0; Target: 3* • Number of companies signing/reporting on United Nations Global Compact Women Empowerment Principles in Turkey *Baseline: 27; Target: 60* • Number of schools that include sexual and reproductive health and gender equality in extracurricular activities *Baseline: 0. Target: 20*	Ministries of Family and Social Policies; Interior; Health; Education, and Justice; Presidency of Religious Affairs; Turkish Parliament, local authorities; women's and human rights NGOs; universities	$3.75 million ($1.0 million from regular resources and $2.75 million from other resources) Programme coordination and assistance. $0.5 million from regular resources